

QUALCOMM®

MAR 15 2004

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5775 Morehouse Drive,
San Diego, California 92121-2779
(858) 587-1121 Fax: (858) 658-2502

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Facsimile Transmittal

DATE: March 15, 2004
TO: USPTO
ATTN: EXAMINER Emmanuel Bayard
RE: Serial No. 09/971,903
FAX : 703-872-9314
FROM: Timothy F. Loomis

Number of Pages Sent: 16 (including this transmittal cover sheet)

ATTACHED HERETO IS AN AMENDMENT IN FOURTEEN (14) PAGES; A ONE (1) PAGE TRANSMITTAL. PLEASE CALL ME IF YOU HAVE ANY QUESTIONS.

I hereby certify that this correspondence is being sent VIA FACSIMILE to the Commissioner of Patents at fax number (703) 872-9314. Attention Office of Amendments, on:

3/15/04

(Date of Deposit)

Darla D. Kasmedo

(Name of the Person Making the Deposit)

(Signature)

PTO/SB/21

U.S. Department of Commerce
Patent and Trademark Office

PATENT

AMENDMENT TRANSMITTAL FORM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: 000063
In Re Application of: Raghu Challa
Serial Number: 09/971,903
Filed: October 4, 2001
Examiner: Emmanuel Bayard
Group Art Unit: 2631

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	40	37	3	x \$18 =	\$54
Independent**	6	8	2	x \$86 =	\$172
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$290	\$0
EXTENSION FEES <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months				\$110	\$
				\$420	\$
				\$950	\$
TERMINAL DISCLAIMER				\$110	\$
				TOTAL FEE	\$226

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$226.
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 3/15/04

Signature: Timothy F. Loomis, Reg. No. 37,883
858-845-8355QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

03/18/2004 DSAVOY 00000002 170026 MAILING

FACSIMILE

01 FC:1201 ☐ deposited with the United States Postal Service
02 FC:1202 with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

☒ transmitted by facsimile to the Patent and Trademark Office.Depositor's Name: Darla D. Kosmedo
(type or print name)Depositor's Name: _____
(type or print name)Signature: 

Date: 3/15/04

(TRANSMITTED VER 1.13-07/30/03)